

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

RECEIVED

2013 JUL 29 AM 7:57

Office Use Only

FEC MAIL CENTER

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

Grow Pac

ADDRESS (number and street)

1645 Madison Avenue

5th Floor

Check if different  
than previously  
reported. (ACC)

New York

NY

10024

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00490292

3. IS THIS  
REPORT

☒ NEW

(N)

OR

☐ AMENDED

(A)

4. TYPE OF REPORT  
(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)

☐ July 15  
Quarterly Report (Q2)

☐ October 15  
Quarterly Report (Q3)

☐ January 31  
Year-End Report (YE)

☒ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)

☐ Termination Report  
(TER)

(b) Monthly  
Report  
Due On:

☐ Feb 20 (M2)

☐ May 20 (M5)

☐ Aug 20 (M8)

☐ Nov 20 (M11)  
(Non-Election  
Year Only)

☐ Mar 20 (M3)

☐ Jun 20 (M6)

☐ Sep 20 (M9)

☐ Dec 20 (M12)  
(Non-Election  
Year Only)

☐ Apr 20 (M4)

☐ Jul 20 (M7)

☐ Oct 20 (M10)

☐ Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

☐ Primary (12P)

☐ General (12G)

☐ Runoff (12R)

☐ Convention (12C)

☐ Special (12S)

Election on

in the  
State of

(d) 30-Day  
POST-Election  
Report for the:

☒ General (30G)

☐ Runoff (30R)

☐ Special (30S)

Election on

in the  
State of

5. Covering Period

01/16/2013

through

07/31/2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

David Malpass

Signature of Treasurer

*David Malpass*

Date

07/24/2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only

**FEC FORM 3X**  
Rev. 12/2004

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

*Gow Pac*

Report Covering the Period:

From:

01 / 16 / 2013

To:

07 / 31 / 2013

**COLUMN A  
This Period**

**COLUMN B  
Calendar Year-to-Date**

6. (a) Cash on Hand  
January 1, 2013

4299.85

(b) Cash on Hand at  
Beginning of Reporting Period.....

4299.85

(c) Total Receipts (from Line 19) .....

2891.88

2891.88

(d) Subtotal (add Lines 6(b) and  
6(c) for Column A and Lines  
6(a) and 6(c) for Column B) .....

7191.73

7191.73

7. Total Disbursements (from Line 31) .....

4084.11

4084.11

8. Cash on Hand at Close of  
Reporting Period  
(subtract Line 7 from Line 6(d)) .....

3107.62

3107.62

9. Debts and Obligations Owed TO  
the Committee (Itemize all on  
Schedule C and/or Schedule D) .....

10. Debts and Obligations Owed BY  
the Committee (Itemize all on  
Schedule C and/or Schedule D) .....

3970.11



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

## Page 3

Write or Type Committee Name

Report Covering the Period:

## I. Receipts

11. Contributions (other than loans) From:

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....		
(ii) Non-Federal Share .....		
(b) Other Federal Operating Expenditures .....	4084.11	4084.11
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....		
22. Transfers to Affiliated/Other Party Committees .....		
23. Contributions to Federal Candidates/Committees and Other Political Committees .....		
24. Independent Expenditures (use Schedule E) .....		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F) .....		
26. Loan Repayments Made .....		
27. Loans Made .....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....		
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs) .....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....		
29. Other Disbursements .....		
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....		
(ii) "Levin" Share .....		
(b) Federal Election Activity Paid Entirely With Federal Funds .....		
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b)) .....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	4084.11	4084.11
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) .....		

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	289188	289188
34. Total Contribution Refunds (from Line 28(d)) .....		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....		
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	408411	408411
37. Offsets to Operating Expenditures (from Line 15, page 3).....		
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....		

13031101030

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: (check only one)			PAGE	OF
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Grow Pac

A. Full Name (Last, First, Middle Initial)  
Californians for A Stronger America

Mailing Address

3614 165th Street

City

Hushings

State

NY

Zip Code

11000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

2891.88

Date of Receipt

01/31/2013

Amount of Each Receipt this Period

2891.88

B. Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

2891.88

Date of Receipt

01/31/2013

Amount of Each Receipt this Period

2891.88

C. Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

2891.88

Date of Receipt

01/31/2013

Amount of Each Receipt this Period

2891.88

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

2891.88  
2891.88

13031101031

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

PAGE OF

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Grow Pac

Full Name (Last, First, Middle Initial)

A. Core, Robert - In the field Consulting

Mailing Address

1520 Myron Street

City

Niskayuna, NY

State

Zip Code

12309

Purpose of Disbursement

Voter Contact

Candidate Name

Chris Collins for Congress

Category/  
Type

Office Sought:

☒ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☒ General

☐ Other (specify) ▼

State: NY

District:

Date of Disbursement

01/31/2013

Amount of Each Disbursement this Period

540.20

B. Core, Robert - In the field Consulting

Mailing Address

1520 Myron Street

City

Niskayuna, NY

State

Zip Code

12309

Purpose of Disbursement

Voter Contact

Candidate Name

Tom Reed for Congress

Category/  
Type

Office Sought:

☒ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☒ General

☐ Other (specify) ▼

State: NY

District:

Date of Disbursement

01/31/2013

Amount of Each Disbursement this Period

379.60

C. Core, Robert - In the field Consulting

Mailing Address

1520 Myron Street

City

Niskayuna, NY

State

Zip Code

12309

Purpose of Disbursement

Voter Contact

Candidate Name

Ann Marie Buerkle for Congress

Category/  
Type

Office Sought:

☒ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☒ General

☐ Other (specify) ▼

State: NY

District:

Date of Disbursement

01/31/2013

Amount of Each Disbursement this Period

284.85

SUBTOTAL of Disbursements This Page (optional).....▶

1,204.65

TOTAL This Period (last page this line number only).....▶

4,084.11

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE OF

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Arw Pac

Full Name (Last, First, Middle Initial)

A. Cole, Robert - In the field Consulting

Date of Disbursement

01 / 31 / 2013

Mailing Address

1520 Myron Street

City

Niskayuna, NY

State

Zip Code

12309

Purpose of Disbursement

Voter Contact

Candidate Name

Maggie Brooks for Congress

Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY

District:

Amount of Each Disbursement this Period

739.95

Full Name (Last, First, Middle Initial)

B. Cole, Robert - In the field Consulting

Date of Disbursement

01 / 31 / 2013

Mailing Address

1520 Myron Street

City

Niskayuna, NY

State

Zip Code

12309

Purpose of Disbursement

Voter Contact

Candidate Name

Michael Grimm for Congress

Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY

District:

Amount of Each Disbursement this Period

196.75

Full Name (Last, First, Middle Initial)

C. Cole, Robert - In the field Consulting

Date of Disbursement

01 / 31 / 2013

Mailing Address

1520 Myron Street

City

Niskayuna, NY

State

Zip Code

12309

Purpose of Disbursement

Voter Contact

Candidate Name

Stephen Labate for Congress

Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY

District:

Amount of Each Disbursement this Period

117.85

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1,054.55

4,084.11



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE OF

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Grow Inc

Full Name (Last, First, Middle Initial)

A. Cole, Robert - In the field Consulting

Date of Disbursement

01/31/2013

Mailing Address

1520 Myron Street

City

Niskayuna

State

Ny

Zip Code

12303

Purpose of Disbursement

Voter Contact

Candidate Name

Richard Hanna for Congress

Category/  
Type

Amount of Each Disbursement this Period

1083.66

Office Sought:

☒ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☒ General

☐ Other (specify) ▼

State: Ny

District:

Full Name (Last, First, Middle Initial)

B. Cole, Robert - In the field Consulting

Date of Disbursement

01/31/2013

Mailing Address

1520 Myron Street

City

Niskayuna

State

Ny

Zip Code

12303

Purpose of Disbursement

Voter Contact

Candidate Name

Chris Gibson for Congress

Category/  
Type

Amount of Each Disbursement this Period

627.25

Office Sought:

☒ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☒ General

☐ Other (specify) ▼

State: Ny

District:

Full Name (Last, First, Middle Initial)

C. Citibank

Date of Disbursement

02/06/2013

Mailing Address

1155 Avenue of the Americas

City

New York

State

Ny

Zip Code

10036

Purpose of Disbursement

Bnk Services Charges

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

19.00

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

1729.91

TOTAL This Period (last page this line number only).....▶

4084.11

13031101034

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE OF

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

*Crowpac*

Full Name (Last, First, Middle Initial)

A. *Citibank*

Date of Disbursement

Mailing Address

*1155 Avenue of the Americas*

City

*New York*

State

*NY*

Zip Code

*10036*

Purpose of Disbursement

*Bank Service Charges*

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

*19.00*

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. *Citibank*

Date of Disbursement

Mailing Address

*1155 Avenue of the Americas*

City

*New York*

State

*NY*

Zip Code

*10036*

Purpose of Disbursement

*Bank Service Charges*

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

*19.00*

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. *Citibank*

Date of Disbursement

Mailing Address

*1155 Avenue of the Americas*

City

*New York*

State

*NY*

Zip Code

*10036*

Purpose of Disbursement

*Bank Service Charges*

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

*19.00*

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

*57.00*

TOTAL This Period (last page this line number only).....▶

*4084.11*

13031101035

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE OF

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

*Grow fac*

Full Name (Last, First, Middle Initial)

A. *Citibank*

Mailing Address

*1155 Avenue of the Americas*

City

*New York, NY*

State

Zip Code

*10036*

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

*06 / 10 / 2013*

Amount of Each Disbursement this Period

*19.00*

Full Name (Last, First, Middle Initial)

B. *Citibank*

Mailing Address

*1155 Avenue of the Americas*

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

*07 / 09 / 2013*

Amount of Each Disbursement this Period

*19.00*

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

*MM / DD / YYYY*

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

*35.00*  
*4084.11*

13031101036

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS** - *Met*

Excluding Loans

(Use separate  
schedule(s)  
for each  
numbered line)

PAGE *2* OF *3*

FOR LINE NUMBER:  
(check only one)

☐ 9  
☐ 10

NAME OF COMMITTEE (In Full)

*Growpac*

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

*Cole Robert, In The field Consulting*

Mailing Address

*1520 Myron Street*

City

State

Zip Code

*Niskayuna, NY 12309*

Nature of Debt (Purpose):

*voter contact:  
Maggie Brooks for  
Congress*

Outstanding Balance Beginning This Period

*0.00*

Amount Incurred This Period

*0.00*

Payment This Period

*739.95*

Outstanding Balance at Close of This Period

*-0-*

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

*Cole Robert, In The field Consulting*

Mailing Address

*1520 Myron Street*

City

State

Zip Code

*Niskayuna, NY 12309*

Nature of Debt (Purpose):

*Voter Contact:  
Michael Grimm  
for Congress*

Outstanding Balance Beginning This Period

*0.00*

Amount Incurred This Period

*0.00*

Payment This Period

*196.75*

Outstanding Balance at Close of This Period

*-0-*

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

*Cole Robert / In The field Consulting*

Mailing Address

*1520 Myron Street*

City

State

Zip Code

*Niskayuna NY 12309*

Nature of Debt (Purpose):

*Voter Contact:  
Stephen Labate  
for Congress*

Outstanding Balance Beginning This Period

*0.00*

Amount Incurred This Period

*0.00*

Payment This Period

*117.85*

Outstanding Balance at Close of This Period

*-0-*

1) SUBTOTALS This Period This Page (optional)..... ►

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ..... ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

13031101037

# SCHEDULE D (FEC Form 3X)

## DEBTS AND OBLIGATIONS

### Excluding Loans

(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 1 OF 3

FOR LINE NUMBER:  
(check only one)

9  
10

NAME OF COMMITTEE (In Full)

Grow Pac

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Cde Robert / In the field Consulting

Mailing Address

1520 Myron Street

City

State

Niskayuna, NY

Zip Code

12309

Nature of Debt (Purpose):

Voter contact:  
Chris Collins  
for Congress

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

540.20

Outstanding Balance at Close of This Period

-0-

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Cde Robert / In the field Consulting

Mailing Address

1520 Myron Street

City

State

Niskayuna, NY

Zip Code

12309

Nature of Debt (Purpose):

Voter contact:  
Ann Marie Burke  
for Congress

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

284.85

Outstanding Balance at Close of This Period

-0-

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Cde Robert / In the field Consulting

Mailing Address

1520 Myron Street

City

State

Niskayuna, NY

Zip Code

12309

Nature of Debt (Purpose):

Voter Contact:  
Tom Reed for  
Congress

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

379.60

Outstanding Balance at Close of This Period

-0-

1) SUBTOTALS This Period This Page (optional).....▶

2) TOTALS This Period (last page this line number only).....▶

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....▶

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)▶

-0-

13031101038

**SCHEDULE D (FEC Form 3X)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate  
 schedule(s)  
 for each  
 numbered line)

PAGE 3 OF 4

FOR LINE NUMBER:  
 (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

Grow Pac

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Cole Robert / In the Field Consulting

Mailing Address

1520 Myron Street

City State

Niskayuna

Zip Code

NY

12309

Nature of Debt (Purpose):

Voter contact:  
 Richard Hanna  
 for Congress

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

1083.66

Outstanding Balance at Close of This Period

-0-

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Cole Robert / In the Field Consulting

Mailing Address

1520 Myron Street

City State

Niskayuna

Zip Code

NY

12309

Nature of Debt (Purpose):

Voter Contact:  
 Chris Gibson  
 for Congress

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

627.25

Outstanding Balance at Close of This Period

-0-

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City

State

Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ▶

2) TOTALS This Period (last page this line number only)..... ▶

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... ▶

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

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PREPARER

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7/29/13

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